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	RIZONA STATE BOA		State File No.
1. PLACE OF BIRTH	STANDARD CERTIFIC	ATE OF BIRTH	Registered No
County Tila	Stat	arisona	•
District or Township	·		<u>, , , , , , , , , , , , , , , , , , , </u>
espala		/illage	
City City	No	in a hospital or institution	on, give its NAME instead of street and nur
2. Full name of child Betty	on Thomas		If child is not yet named.
0.0	4. Twin, triplet or other	6. Legitimate?	supplemental report, as dire
To be answered ONLY in event of plural	, a. I will, diplot of other	Uo .	7. Date 9an 21 192
Sewale births.	5. No., in order of birth		of birth Month Day Year
8. FATHER	1	a. (/	MOTHER
Full name Fredrick Thomas	, , , , , , , <b>F</b>	ull malden name Po	whing Combo
9. Residence (Usual place of abode)	1/	5 Residence (Usual place of abode)	211 0
(Usual place of abode) Illoho If non-resident, give place and state.	arjona	If non-resident, give	place and state. augone
10. Color or race		6 Color or race	
White 11. Age at last b	oirthday 30 (Years)	White	17. Age at last birthday 2-/(Y
D			P +
12. Birthplace (city or place)	and 1	8. Birthplace (city or p	place) Central,
(State or country)		(State or country)	argora.
13. Occupation		9. Occupation	. ()
Nature of industry Muuli	tan jaraharan 🍴 🍈	Nature of Industry	Hangewy
			$\mathcal{T}$
20. Number of children of this mother	(a) Born alive and no (b) Born alive but no	ow living one	21. Were precautions taken against
(Taken as of time of birth of child herein			thalmia neonatorum?
certified and including this child.)	(c) Stillborn	une	L KS
CERTI I hereby certify that I attended the birth of ti	FIGATE OF ATTENDING PI	iysician or midwi A alwe	376 0 V
		alive or stillborn.)	m. on the date above at
*When there was no attending physician or midwife, then the father, householder,	Signature	( Harre	ru, D;
etc., should make this return. A stillborn child is one that neither breathes nor		Phy	nian
shows other evidence of life after birth.	***************************************	een at 1	(Physician or midwife).
Given name added from a supplemental report.		Hohe, 1	anjora
Month, day, yea	/	3/ 25	Sol So Honor
Registrar	Filed	19	Registrar

232-124-732

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